



**Insights into Mentoring in Biomedical Careers from
Social Science Research**



Overall Observations

- Mentoring programs by and large are not taking advantage of research concepts and practices from relevant areas of scholarship, including adult education, counseling, psychology, and other social sciences
- A bigger institutional cultural change is needed – not just mentoring programs.
- Bring in experts in organizational change, knowledge translation, and innovative diffusion
- We need to move beyond traditional mentoring models



Core Values

- Advancement of women in biomedical sciences requires institutional and organizational change in academic medicine
- Advancement of women also requires ongoing and proactive attention to multiculturalism, gender stereotypes, and power differentials



Mentoring Research

- NIH should take a leadership role in supporting mentoring as a valued area of rigorous research and scholarship
 - Fund research on innovative and collaborative mentoring models (e.g. R01)
 - All research should attend to cultural differences
 - Build and fund mentoring components into all research and training grants
 - Build evaluation into all mentoring and career development grants
 - Initiate a K07 for developing mentor programs
 - Mandate and fund mentoring and mentor training (e.g. K23, K08)



Interdisciplinary Mentoring

- Mentoring programs should be inclusive across health sciences
- Mentoring programs should be based on the knowledge base on social science research



Resources & Synergies

- Replicate NSF ADVANCE model
- Draw on existing best practices (e.g. Office of Research Integrity, NIGMS)
- Bring together and disseminate existing knowledge and resources
- Cost/benefit analysis of inadequate mentoring